

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: New

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Title:: SYSTEM AND METHOD FOR TRANSPLANTATION OF DERMAL
TISSUE

Attorney Docket No.: CEL.728.US

Request for Early Publication?: No

Suggested Drawing Figure:: Figure 1

Total Drawing Sheets:: 31 (thirty one)

Small Entity?: No

Petition Included?: No

Secrecy Order in Parent Application?: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

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Middle Name::

Family Name:: Eriksson

City of Residence:: Wellesley Hills

State or Province of Residence:: Massachusetts

Country of Residence:: US

Street of Mailing Address::

City of Mailing Address::

State or Province of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Ajit

Middle Name::

Family Name:: Mishra

City of Residence::

State or Province of Residence::

Country of Residence:: US

Street of Mailing Address::

City of Mailing Address::

State or Province of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: Girouard
City of Residence:: San Antonio
State or Province of Residence:: Texas
Country of Residence:: US
Street of Mailing Address::
City of Mailing Address::
State or Province of mailing address::
Postal or Zip Code of mailing address::
Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Royce
Middle Name::
Family Name:: Johnson
City of Residence:: San Antonio
State or Province of Residence:: Texas
Country of Residence:: US
Street of Mailing Address::
City of Mailing Address::
State or Province of mailing address::
Postal or Zip Code of mailing address::
Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: Makoto
Middle Name::
Family Name:: Takeuchi
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CORRESPONDENCE INFORMATION

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REPRESENTATIVE INFORMATION

Representative Customer Number:	30159
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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	Conversion of Provisional Application	60/414,133	09/28/2002

FOREIGN PRIORITY INFORMATION**ASSIGNEE INFORMATION****Certificate of Mailing**

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